

# Site Demolition Permit Application

**City of Brookhaven**  
200 Ashford Center North, Suite 150  
Dunwoody, GA 30338  
(404) 637-0500 Fax (404) 637-0501  
www.brookhavenga.gov

<b>Project</b>	Name of Project:		
	Description:		
	Street Address:		Suite #:
<b>Applicant Information</b>	Name:		
	Contact Name:		
	Address:		
	Phone:	Fax:	Email:
<b>Property Owner</b>	Owner's Name:		
	Owner's Address:		
	Phone:	Fax:	Email:
<b>Architect / Engineer</b>	Company Name:		
	Contact Name:		
	Address:		
	Phone:	Fax:	Email:
<b>General Contractor</b>	Company Name:		
	Contact Name:		
	Address:		
	Phone:	Fax:	Email:
<b>Authorized Signatures</b>	The undersigned, upon oath, states that the above information is true and correct, understands that the Permit issued is only for construction as stated and that occupancy of the structure is not permissible until all requirements are met and a Certificate of Completion has been issued by the City.		
	A complete set of approved site plans must be furnished to the City on all projects. Construction will begin no later than six months from the issue date of the permit.		
	Applicant's Name:		
	Applicant's Signature:		Date:
	Property Owner's Name:		
	Property Owner's Signature:		Date:
	This document <input type="checkbox"/> was/ <input type="checkbox"/> was not signed in the presence of:		
	City Personnel:		Date:
<b>Fees</b>	Permit #:	Issue Date:	Fee: \$
	Received By:		Date: Receipt #: